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Complete and sign ~~fill~~ ~~in~~ ~~mark~~ ~~here~~, together with applicable fee(s), to:

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26584      7590      01/15/2002

**OTIS ELEVATOR COMPANY**  
**INTELLECTUAL PROPERTY DEPARTMENT**  
**10 FARM SPRINGS**  
**FARMINGTON, CT 06032**

3-25-02

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Maxy Forster	(Depositor's name)
Maxy Forster	(Signature)
March 14, 2002	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/577,558	05/24/2000	Pedro S. Baranda	OT-4190B	7708

TITLE OF INVENTION: TENSION MEMBER FOR AN ELEVATOR

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
26	nonprovisional	NO	\$1280	\$0	\$1280	04/15/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRAN, THUY VAN	3632	187-254000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  
(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Otis Elevator Company

Farmington, Connecticut

Please check the appropriate assignee category or categories (will not be printed on the patent)       individual     corporation or other private group entity     government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

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Advance Order - # of Copies 12

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(Authorized Signature) *Sean W. O'Brien (Reg. No. 37,589)* (Date) *3/14/02*

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03/27/2002 NGBR00000066 150750 09577558

01 FC:142      1280.00 CH  
02 FC:561      36.00 CH

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